

Application to set aside a decision of the First-tier Tribunal (Care Standards)

For office use only

Case reference number

Office stamp
(date received)

Use this form to apply to have a decision or part of a decision of the First-tier Tribunal (Care Standards) set aside.

Please complete this form in CAPITAL LETTERS or type and either return it by post, email or fax, details at the end of this form.

A – Applicant's details

Title ☐ Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other (please specify) Surname or organisation First name(s) Address
Telephone number
Mobile number
Postcode Email address

B – Your representative's details

Name Profession Address
Telephone number
Mobile number
Fax number
Postcode Email address

Important: We can only send papers and documents to one of the people named on this form. If you do not tell us otherwise we will automatically send the papers to you.

Who should receive information about the appeal?

☐ You ☐ Your representative

C – About the decision you want set aside

What was the Appellant’s appeal number you want permission to appeal:

D – Reasons for any delay

Has more than 28 days passed from the date the decision was sent to you? ☐ Yes ☐ No

If Yes, you must apply for an extension of time by giving your reasons for the delay in the box below:

Continue on a separate sheet if necessary.

E – Reasons for application to set aside a decision or part of a decision

I am asking the Tribunal to set aside the decision or part of the decision because (tick as appropriate):

- ☐ A document relating to the proceedings was not sent to, or was not received at an appropriate time by, a party or a party’s representative
- ☐ a document relating to the proceedings was not sent to the Tribunal at an appropriate time
- ☐ a party, or a party’s representative, was not present at a hearing related to the proceedings
- ☐ there has been some other procedural irregularity in the proceedings

Please explain what happened and why it is in the interests of justice for the Tribunal to set aside its decision. If you are asking for it to set aside a part of its decision please identify which part of the decision you want set aside.

Continue on a separate sheet if necessary.

F – Other information and your signature

Time limits for application

You **must** complete and return this application **within 28 days** from the date on the letter sent with the decision. Your application must also include a copy of the decision and any other relevant documentation.

If you are unsure about the time limit, refer to the guidance 'Appealing to the First-tier Tribunal (Care Standards) – a guide to the appeals procedures' (available from the Care Standards website: www.justice.gov.uk/tribunals/care-standards) or contact the Care Standards Office for advice (details below).

In certain circumstances you can ask for an extension of time if you are late in sending this appeal application. You **MUST** give the reasons for the delay. It is not possible to extend time limits in some cases.

If you do not meet the specified time limit for appealing and the Tribunal does not allow your application for an extension of time, or where it is not possible to extend the time, your appeal will not be admitted, it is therefore very important to meet the deadline.

Your signature:

Date:

This form can be signed by the person bringing the appeal or by their Legal Representative.
(A typed signature is acceptable)

When you have completed this form, send it **with a copy of the decision letter** sent to you, giving you the right to appeal **and any other relevant documentation**.

Care Standards contact details

Post:

HM Courts & Tribunals Service
Care Standards
1st Floor, Darlington Magistrates' Court
Parkgate
Darlington
DL1 1RU

Telephone: 01325 289350

Email: cst@hmcts.gsi.gov.uk

Fax: 01264 785013

For further information about appeals to the Tribunal, go to the Care Standards website: www.justice.gov.uk/guidance/courts-and-tribunals/tribunals/care-standards/index.htm